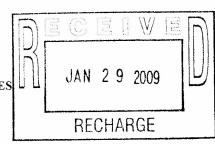


3550 North Central Ave, 2nd Floor Phoenix, Arizona 85012-2105 Phone (602) 771-8585 Fax (602) 771-8689



APPLICATION FOR GROUNDWATER SAVINGS FACILITY PERMIT (§ 45-812.01)

APPLICATION FEE IS \$ 500.00 DUE UPON FILING.

PERMIT FEE OF\$ 350.00, PLUS NOTICE AND PUBLICATION FEES TO BE DETERMINED, ARE ALSO DUE PRIOR TO ISSUANCE OF PERMIT.

PLEASE SUBMIT ONE ORIGINAL AND ONE COPY OF THE COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS.

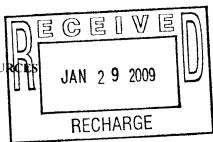
FOR OFFICE USE ONLY	
Application No.: 72-538133.000 3	
Date Received: 1 - 29 - 09	

1.	Name of Applicant: Central Anzona Water Conservation District					
	Po Box A3020 Pho Mailing Address City	enix	A zState	85080 - 3020 Zip		
	Facility Contact Person Tom Harbor To		09-2107	,	? d.	
2.	2. Name of Active Management Area or Irrigation Non-E	xpansion Area if appl	icable, and name	of groundwater basin and		
	subbasin where the facility will be located	cson AMA				
3.	3. Name of the owner(s) of the land where the facility wil	be operated SEE	ATTACH	AD LIST		
	Mailing Address(If more than one owner, attach a lis	showing correspondi	ng land owner an	d well registration number(s)).		
			-	•		
4.	4. Legal description of the location of the facility 16F	R'S IN EXM (quarter/o	IBIT A quarter/section	PLAN OF OPARATION, township and range)	ON	
		n.	151A100	16 (1)6		
	729 V VASUE	September 1		MS, INC.		
6.	The maximum annual amount of water that may be stored at the facility 14, 653.4 AF					
7.	7. Proposed duration of permit 5 YARS					

Revised 3/23/2006

ARIZONA DEPARTMENT OF WATER RESOU

Water Management Division 3550 North Central Ave, 2nd Floor Phoenix, Arizona 85012-2105 Phone (602) 771-8585 Fax (602) 771-8689



APPLICATION TO CONVEY AN UNDERGROUND WATER STORAGE PROGRAM PERMIT: FOR OFFICE USE ONLY CONVEYANCE FEE of \$300.00 DUE UPON FILING Application No.: 72-538133, 0003 PUBLICATION FEES TO BE DETERMINED WILL BE DUE Date Received: 1 - 29 - 09 PRIOR TO ISSUANCE OF PERMIT PLEASE SUBMIT ONE ORIGINAL AND THREE COPIES OF THE COMPLETED APPLICATION AND ALL SUPPORTING **MATERIALS** TYPE OF PERMIT TO BE CONVEYED: (Check one) ☐ Underground Storage Facility Permit Groundwater Savings Facility Permit ☐ Water Storage Permit [A.R.S. § 45-814.01 (E)] A.R.S. § 45-814.01 (E) [A.R.S. § 45-831.01 (F)] **GENERAL INFORMATION** 1. Name of Applicant (current permittee): Central Arizona Water Conservation District P.o. Box 43020
Mailing Address Contact Person: 10m Harbour Telephone: (623) 869-2107 Fax: (623) 869-2674 2. Application is being CONVEYED TO (new permittee): BKW Farms, Inc. Marana Az 85653-0186
City State Zip P.O. Box 186 Mailing Address Contact Person: Ron Wong Telephone: (520) 682-2516 Fax: SUPPORTING EVIDENCE If Underground Storage Facility (USF) permit conveyance, please submit the following: A. Current Permit # 71-B. Technical Capability: If the person(s) principally responsible for overseeing the operations will change as a result of the conveyance, the applicant must demonstrate that the new permittee is technically capable of operating and reporting for the USF in accordance with all terms and conditions of the USF permit. The

C. Financial Capability: The applicant must demonstrate that the new permittee has the financial capability to construct, operate and report for the USF in accordance with all terms and conditions of the USF permit. The applicant must submit information on financial capability described in Section III.D.2 of the

applicant must submit the information on technical capability described in Section III.D.1 of the

Underground Storage Facility Application Guide as it applies to the new permittee.

NOTARIZED SIGNATURE - CURRENT PERMITTEE

1 (we), Centrum Hrizona WaterConservation District, the current
permittee(s) named in this application, do hereby certify under the penalty of perjury, that the information
contained and statements made herein are to the best of my (our) knowledge and belief true, correct and complete.
2 v y government and complete.
1
Vanux (CT) nie
Signature of applicant or authorized agent for current permittee(s
organical of authorized agent for current permittees
Dap-ty General Manager Title
of if where manager
Title
CTATE OF A DIZONA
STATE OF ARIZONA)
\mathcal{N}_{\bullet}) ss.
County of Maricopa) ss.
County of 1101 100 pc)
Subscribed and sworn to before me this 8 day of January, 2009.
Auson de lues
Notary Public
3/14/2010 SUSPFICIAL SEAL NOTIABLE DITE M. UPS C
My commission expires
My Comm. Expires March 14, 2010